

ORDER FOR SUPPLIES AND SERVICES				IMPORTANT: See instructions in GSAR 553.370-300-1 for distribution		PAGE 1 OF 1 PAGE(S)	
1. DATE OF ORDER 03/29/2016		2. ORDER NUMBER GSQ0316DS0025		3. CONTRACT NUMBER GS-35F-0478J		4. ACT NUMBER A74157060	
<b>FOR GOVERNMENT USE ONLY</b>	5. ACCOUNTING CLASSIFICATION				6. FINANCE DIVISION		
	FUND 285F	ORG CODE Q03FA000	B/A CODE AA20	O/C CODE 25	AC	SS	VENDOR NAME
	FUNC CODE AF151	C/E CODE H08	PROJ./PROS. NO.	CC-A	MDL	FI	G/L DEBT
	W/ITEM	CC-B	PRT./CRFT	AI	LC	DISCOUNT	
7. TO: CONTRACTOR (Name, address and zip code) Robin G Davis TMCI - THE MCVEY COMPANY, INC. 8270 WILLOW OAKS CORPORATE DR FAIRFAX, VA 220314516 United States 703-575-5000				8. TYPE OF ORDER B. DELIVERY		REFERENCE YOUR	
				Please furnish the following on the terms specified on both sides of the order and the attached sheets, if any, including delivery as indicated.			
				This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above numbered contract.			
				C. MODIFICATION NO. 000 TYPE OF MODIFICATION:		AUTHORITY FOR ISSUING	
9A. EMPLOYER'S IDENTIFICATION NUMBER (b) (4)		9B. CHECK, IF APPROP WITHHOLD 20%		Except as provided herein, all terms and conditions of the original order, as heretofore modified, remain unchanged.			
10A. CLASSIFICATION Woman Owned Business				10B. TYPE OF BUSINESS ORGANIZATION C. Corporation			
11. ISSUING OFFICE (Address, zip code, and telephone no.) GSA Region 3 Katrina Lloyd 100 S Independence Mall West Philadelphia, PA 19106-0000 United States (215) 446-4898		12. REMITTANCE ADDRESS (MANDATORY) TMCI - THE MCVEY COMPANY, INC. 5205 LEESBURG PIKE FALLS CHURCH, VA 22041-3802 United States		13. SHIP TO (Consignee address, zip code and telephone no.) Michael Clay 7700 Arlington Blvd Suite 5101 Falls Church, VA 22042 United States (703) 681-5996			
14. PLACE OF INSPECTION AND ACCEPTANCE Michael Clay 7700 Arlington Blvd Suite 5101 Falls Church, VA 22042 United States		15. REQUISITION OFFICE (Name, symbol and telephone no.) Christopher Lauer GSA Region 3 100 S Independence Mall West Philadelphia, PA 19106-0000 United States (757) 483-5815					
16. F.O.B. POINT Destination		17. GOVERNMENT B/L NO.		18. DELIVERY F.O.B. POINT ON OR BEFORE 03/09/2017		19. PAYMENT/DISCOUNT TERMS NET 30 DAYS / 0.00 % 0 DAYS / 0.00 % 0 DAYS	
20. SCHEDULE							
Firm Fixed Price (FFP) task order number GSQ0316DS0025 is awarded against the GSA IT 70 Schedule contract GS-35F-0478F to provide trouble ticket and data reconciliation support to the Defense Health Agency (DHA). This task order incorporates the Performance Work Statement (PWS) under ITSS Control #ID03160001 and accepts the Contractor's quote dated February 26, 2016.							
The Base Period of Performance is from April 10, 2016 through April 09, 2017, with four (4) twelve-month option periods. The overall ceiling value of this task order is (b) (4). The base period is hereby exercised in the amount of \$1,923,622.86 (inclusive of mandatory labor CLINs 0001, 0001, and 0002).							
Full funding is hereby provided in the amount of \$1,923,622.86. The Contractor shall not exceed this amount or the exercised value without prior written authorization from the GSA Contracting Officer.							
ITEM NO.	SUPPLIES OR SERVICES			QUANTITY ORDERED	UNIT	UNIT PRICE	AMOUNT
(A)	(B)			(C)	(D)	(E)	(F)
0001	Helpdesk and Technical Support - Base Period			1	lot	(b) (4)	
0002	Program Management Support - Base Period			1	lot		
21. RECEIVING OFFICE (Name, symbol and telephone no.) TriCare Management Activity-DOD, (703) 681-5996						TOTAL From 300-A(s)	
22. SHIPPING POINT Specified in QUOTE				23. GROSS SHIP WT.		GRAND TOTAL	\$1,923,622.86
24. MAIL INVOICE TO: (Include zip code) General Services Administration (FUND) The contractor shall follow these Invoice				25A. FOR INQUIRIES REGARDING PAYMENT CONTACT: GSA Finance Customer Support		25B. TELEPHONE NO. 816-926-7287	
				26A. NAME OF CONTRACTING/ORDERING		26B. TELEPHONE NO.	

<b>Submission Instructions.</b> The contractor shall submit invoices electronically by logging into the ASSIST portal ( <a href="https://portal.fas.gsa.gov">https://portal.fas.gsa.gov</a> ), navigating to the appropriate order, and creating the invoice for that order. For additional assistance contact the ASSIST Helpdesk at 877-472-4877. Do NOT submit any invoices directly to the GSA Finance Center (neither by mail nor via electronic submission).	<b>OFFICER (Type)</b> Katrina Lloyd	(215) 446-4898
	<b>26C. SIGNATURE</b> Katrina Lloyd 03/29/2016	
<b>GENERAL SERVICES ADMINISTRATION</b>	<b>1. PAYING OFFICE</b>	<b>GSA FORM 300 (REV. 2-93)</b>